

**Please complete form. Handwritten forms will NOT be accepted. Print and sign form before mailing to:**

## KANSAS STATE BOARD OF TECHNICAL PROFESSIONS

900 SW Jackson Street, Suite 507, Topeka, KS 66612

[www.ksbtp.ks.gov](http://www.ksbtp.ks.gov)

785-296-3053

### PROFESSIONAL ENGINEER APPLICATION FOR LICENSURE BY COMITY/RECIPROCITY

INSTRUCTIONS: Applicants should read all statutes, rules and regulations for details regarding requirements available on the KSBTP web page. *See Page 7 of this application for important additional information regarding requirements for a Kansas License.*

- Application must be complete and received by KSBTP 30 days prior to next scheduled meeting of the Board. See schedule of KSBTP Board Meetings on web page.
- Social Security: Pursuant to K.S.A. 74-139 and 74-148, the Board requests a Social Security number. Providing this information is voluntary. If provided, it may be disclosed to the Director of Taxation and/or the Kansas Department for Children and Families (DCF) for child support enforcement purposes.

#### COMPLETE APPLICATION FILE WILL INCLUDE THE FOLLOWING:

1. **APPLICATION FORM** – Print completed form, sign, date and send all required information to KSBTP.
2. **APPLICATION FEE - \$250** Please make check payable to Kansas State Board of Technical Professions. Application fees are non-refundable. Pending application files are retained for one year.
3. **APPLICANTS WITH NCEES RECORD** – KSBTP accepts the NCEES Council record. Send Pages 1 and 2 of this application to KSBTP. Request a council record containing transcripts, references and experience be sent directly to KSBTP. ([www.ncees.org](http://www.ncees.org))
4. **THREE PROFESSIONAL REFERENCES** – In accordance with K.A.R. 66-10-14(a), you are required to have at least *three* references from licensed professional engineers. Four years of experience must be verified by a person familiar with your engineering experience. Any licensed individual who verifies your experience may be counted as one of the professional references. Send a copy of the completed professional experience record with a reference form to the three references. Professional reference forms must be returned directly to the board office from the person supplying the information. The Reference Forms may be 'handwritten'. Relatives may not serve as references.
5. **TRANSCRIPTS** – Official transcripts are required for all educational credit claimed. Please send an "official" transcript or have the school send a transcript directly to KSBTP. If originally licensed after January 1, 1993, foreign baccalaureate engineering degrees must be evaluated. (See Special Instructions on page 8.)
6. **VERIFICATION OF EXAMS AND LICENSURE** – Request an electronic verification through the NCEES verification system for all exams and one current license. Go to <https://verify.ncees.org/boards/1022>. Fill in the requested information and submit. Once the process has been completed and the Kansas Board has been sent your verification, you will receive an email notice. If the State Board you are requesting verification from is not listed on the NCEES form, contact that Board for instructions.

**HANDWRITTEN OR INCOMPLETE** forms will be returned. **Applicant will be notified of Board action.** Keep a **copy** of this application for your records.

### I. GENERAL INFORMATION

APPLICANT NAME: \_\_\_\_\_ Maiden Name: \_\_\_\_\_  
(First, Middle, Last)

Social Security #: \_\_\_\_\_ Date of Birth: \_\_\_\_\_ Send official mail to: Home Business

Home Mailing Address: \_\_\_\_\_ City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Business Name: \_\_\_\_\_

Business Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip: \_\_\_\_\_

Phone Number: \_\_\_\_\_ Ext. \_\_\_\_\_ E-mail address: \_\_\_\_\_

APPLICANT NAME: \_\_\_\_\_

**II. EDUCATION: (Information required even if applicant is submitting NCEES record.)**

Name and Location of Institution	Dates Attended	Date Graduated	Degree Received (i.e. BS Civil Engineering)

Official transcripts are:      Enclosed      School will send      In NCEES Record  
 (Transcripts submitted by internet or FAX are NOT acceptable.)

**III. LICENSURE HISTORY: (Information required even if applicant is submitting NCEES record.)**

Type of Certificate or Examination	Original State	Date of Exam	NCEES Exam (Yes/No)	License or Certificate Number	Date License Issued
Fundamentals of Engineering Exam (FE)					
Principles & Practice of Engineering Exam (PE)					

LIST OTHER STATES WHERE CURRENTLY LICENSED: \_\_\_\_\_

**IV. CERTIFICATE OF AUTHORIZATION REQUIREMENT:** Are you practicing or offering to practice the technical profession through a business entity?      YES      NO

If YES, once Responsible Principal has been issued an individual Kansas license, submit complete application for a KSBTP *Certificate of Authorization for a Business Entity* available on the web site. In accordance with K.S.A. 74-7036, a business entity practicing or offering to practice a technical profession in Kansas must obtain a Certificate of Authorization.

If business entity currently has a KSBTP Certificate of Authorization, please complete the following information:

Business Entity Name: \_\_\_\_\_ Certificate of Authorization #: \_\_\_\_\_

**V. SIGNATURE:** Have you ever been convicted of a felony, or had any disciplinary or administrative action taken against your license in another jurisdiction?      YES      NO (If YES, explain - use separate sheet if necessary.)**I HEREBY CERTIFY THAT ALL STATEMENTS IN THIS APPLICATION ARE TRUE AND CORRECT.**\_\_\_\_\_  
SIGNATURE\_\_\_\_\_  
DATE**\*\*\*STOP HERE IF SUBMITTING AN NCEES RECORD.****VI. REFERENCE SUMMARY: (List names of licensed professionals who will provide references):**

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

List references who can verify professional experience listed on experience record and are licensed in your profession. Relatives may not serve as references. Use Reference Forms on pages 5 and 6 for this purpose.

**APPLICANT NAME:** \_\_\_\_\_

## **VII. PROFESSIONAL EXPERIENCE RECORD**

**Important: Read all instructions in this section before completing experience record.**

1. In chronological order beginning with date baccalaureate degree was conferred, enter month and year of all engagements (engineering, non-engineering and times of unemployment). The letter (a) designates the first engagement. Letter subsequent engagements consecutively with (b), (c), etc. Engagements can be divided by company, by job title or time of unemployment. Do not leave any time gaps from graduation to the present.
2. In column 3, state the title of your position and the name and address of your employer. If you have been employed by more than one employer, each is considered a separate engagement. Engineering engagements must be explained in detail giving **at least two specific project examples**. Non engineering or unemployment entries need only a brief explanation of activities during those times. No references are needed for non engineering engagements.
3. Using *years* and *months*, enter total time spent on engagement (or time of unemployment) in Column 4. Enter the portion of your time spent in activity other than engineering in Column 5. Enter the portion of your time spent in engineering in Column 6. Columns 5 and 6 should equal Column 4. **Enter totals on last page only. More pages may be used if needed.**
4. Four years of professional engineering experience must be verified by an employer/supervisor. List the name(s) and license numbers(s) of the individual(s) providing this verification in Column (7) beside the appropriate engagement.
5. Send reference forms (Pages 5 and 6) and a copy of your experience record to each individual who will be providing an experience verification or professional reference. References may submit 'handwritten' forms.
6. Applicants are required to have a minimum of three references from licensed professional engineers. If your employer/supervisor is licensed, you are required to supply two additional professional references. If your employer/supervisor is not licensed, you must supply three additional licensed professional references.

(1) From MM/YY	(2) To MM/YY	(3) Experience Engagements	(4) Total Time  YR/MO	(5) Non- Eng.  YR/MO	(6) Eng.  YR/MO	(7) Professional Reference Familiar with Engineering Engagement
06/01	12/02	(a) <b><u>SAMPLE</u></b> - XYZ Engineering 900 SW Jackson Topeka KS 66612 <b>Project 1:</b> (PROJECT NAME/LOCATION) Project manager/design manager for design, procurement, construction and operation of the Hot Gas Decontamination System for decontamination of equipment and structures contaminated with chemical agent. The process uses thermal desorption and thermal destruction to decontaminate facilities. <b>Project 2:</b> (PROJECT NAME/LOCATION) Project engineer for design and performance specifications for hazardous groundwater treatment plant to treat contaminated groundwater removed from monitoring wells at facilities.	1y/6m	0	1y/6m	Jane Doe, PE KS License #20001
SAMPLE						SAMPLE
-----	-----	(Begin with date Baccalaureate degree was conferred. Leave no gaps.)	-----	-----	-----	-----

(YR/MO) (YR/MO) (YR/MO)

**\*\*TO REPORT ADDITIONAL EXPERIENCE, PRINT THIS FORM, CLEAR IT, AND ENTER NEXT ENGAGEMENTS.**

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**TOPEKA KS 66612**  
**785-296-3053** **www.ksbtp.ks.gov**

**NOTICE OF REFERENCE REQUEST**

**APPLICANT INFORMATION: (To be completed by APPLICANT)**

1. Applicant Name: \_\_\_\_\_

2. Date for form to reach KSBTP: \_\_\_\_\_

**Reference Name:** \_\_\_\_\_

**Reference Address:** \_\_\_\_\_

**To the Reference:** The applicant listed above has given your name as an employer or one who is acquainted with one or more experience engagements listed in the experience record form accompanying this reference form. This Board is required by law to obtain evidence of the technical ability of applicants for licensure. Statements by responsible individuals with personal knowledge of the applicant's qualifications will be considered as evidence. Additional information may be attached. The Reference Form may be 'handwritten'. Please write legibly.

The Board would like to emphasize that evidence submitted on this form must not be perfunctory nor made for the mere purpose of aiding the applicant to be licensed. The execution of this statement will be accepted by the Board as a deliberate act made with full knowledge of the responsibility to protect the public health, safety and welfare. It should be borne in mind that the applicant is not being considered for membership in an organization but for licensure as a professional engineer in Kansas.

Since the Board cannot process this application until receipt of this reference, a prompt reply will expedite the handling of the application. **Your professional seal is required on this form. If you have no seal, please send a copy of your license.**

***THIS INFORMATION WILL BE TREATED IN THE STRICTEST CONFIDENCE.***

The **REFERENCE FORM FOR EXPERIENCE VERIFICATION** (which should be enclosed with this Notice) is to be returned directly to the board office at:

**KANSAS STATE BOARD OF TECHNICAL PROFESSIONS**  
**900 SW JACKSON, SUITE 507**  
**TOPEKA, KS 66612**

**Jean Boline, KSBTP Executive Director**

**KSBTP REFERENCE FORM FOR EXPERIENCE VERIFICATION****TO BE COMPLETED BY APPLICANT:**

Applicant Name: \_\_\_\_\_

Have you and Respondent been employed by or been members of the same business entity? YES NO

If yes, please complete the following information.

	First Engagement	Other Engagement
From – To (MM/YY)		
Name of Business Entity		
City		
Applicant's Position		
Respondent's Position		

Have you known each other in other circumstances? YES NO If YES, give dates and explain:

**TO BE COMPLETED BY REFERENCE: (Reference form may be 'handwritten'. Please write legibly.)**

- I have known the applicant for \_\_\_\_\_ years, from \_\_\_\_\_ to \_\_\_\_\_.  
mm/yy mm/yy
- Is the information listed above correct as stated? YES\_\_\_\_ NO\_\_\_\_ If NO, please explain on separate sheet.
- Professional relationship to applicant (i.e. supervisor, co-worker, etc.): \_\_\_\_\_.
- How many years has applicant been engaged in engineering work? \_\_\_\_ In responsible charge of engineering work? \_\_\_\_  
Engaged in engineering design? \_\_\_\_\_
- Would you recommend this applicant be licensed? YES\_\_\_\_ NO\_\_\_\_

6.	Excellent	Satisfactory	Poor
Please rate applicant's:	---	---	---
Professional Reputation			
Technical Knowledge			
Competence			

Other Comments: \_\_\_\_\_

Respondent's Name: \_\_\_\_\_

Respondent's Firm: \_\_\_\_\_ Position in Firm: \_\_\_\_\_

Address of Respondent's Firm: \_\_\_\_\_

Phone: \_\_\_\_\_ E-mail: \_\_\_\_\_

Respondent's Licensure: Jurisdiction: \_\_\_\_\_ License Number: \_\_\_\_\_ Year Licensed: \_\_\_\_\_

Reference's Professional Seal  
With Signature and Date

SIGNATURE

DATE

## **KANSAS STATE BOARD OF TECHNICAL PROFESSIONS**

**KANSAS COMITY/RECIPROCITY INFORMATION:** Pursuant to K.S.A. 74-7024, the Kansas board will accept an applicant by comity or reciprocity provided the qualifications at the time the original license was issued would have met Kansas requirements if the application had been made in Kansas on that date.

### **REQUIREMENTS FOR PROFESSIONAL ENGINEERS**

If you were

originally licensed:      Kansas Requirements

Prior to 1947	(a) None
1947 – 1952	(a) EAC/ABET accredited engineering degree; OR (b) 8 years experience and 16 hours examination; OR (c) 35 years of age plus minimum of 12 years experience.
1953 – 1960	(a) EAC/ABET accredited engineering degree and 4 years experience; OR (b) 8 years experience plus 16 hours examination; OR (c) 35 years of age plus minimum of 12 years experience.
1961 – 1968	(a) EAC/ABET accredited engineering degree, 4 years experience and 16 hours examination OR (b) 8 years experience and 16 hours examination; OR (c) 12 years or more experience plus 8 hours examination.
1969 – 1977	(a) EAC/ABET accredited engineering degree, 4 years experience and 16 hours examination; OR (b) 8 years or more experience and 16 hours examination; OR (c) Accredited engineering degree, 12 years or more experience, and 8 hours examination.
1978 – 1992	(a) EAC/ABET accredited engineering degree, 4 years experience and 16 hours examination; OR (b) 8 years or more experience and 16 hours examination; OR (c) Accredited engineering degree, 25 years or more experience, oral fundamentals exam and 8 hours written exam.
1993 – Present	(a) EAC/ABET accredited engineering degree, 4 years experience and 16 hours NCEES examination.

**\*\* For those licensed since January 1, 1993, Technology degrees are not accepted by the Board.**

### **SPECIAL INSTRUCTIONS FOR APPLICANTS WITH BACCALAUREATE ENGINEERING DEGREES FROM OUTSIDE THE UNITED STATES:**

If originally licensed after Jan. 1, 1993, any applicant with a baccalaureate engineering degree from outside the United States must have that degree evaluated by NCEES before educational credit may be considered by the board. According to K.A.R. 66-9-4, a college or university program that is adequate in its preparation of students for the practice of engineering means a baccalaureate engineering curriculum accredited by the Engineering Accreditation Commission of ABET (EAC/ABET). Any other engineering curriculum which has not been accredited by EAC/ABET but has been evaluated and found to be of an equivalent standard, may be reviewed and accepted by the board.

**NCEES CREDENTIALS EVALUATIONS      \*\*Request a report be sent to KSBTP.**

**Website:** [www.ncees.org](http://www.ncees.org)

**Phone:** 1-800-250-3196 or (864)-654-6824

**NOTE:** All questions regarding the evaluation of your degree should be directed to NCEES.

- The Board will make the final determination of the educational requirement per K.A.R. 66-9-4.
- Send degree materials as soon as possible as a thorough evaluation of educational credentials may take several months.